

# FRATERNAL SOCIETIES

COMPANY NAME: \_\_\_\_\_ NAIC Company Code: \_\_\_\_\_  
 Contact: \_\_\_\_\_ Telephone: \_\_\_\_\_  
 REQUIRED FILINGS IN THE STATE OF: **SOUTH DAKOTA \*** Filings Made During the Year 2011

(1) Check-list	(2) Line #	(3) REQUIRED FILINGS FOR THE ABOVE STATE	(4) NUMBER OF COPIES*			(5) DUE DATE	(6) FORM SOURCE**	(7) APPLICABLE NOTES
			Domestic		Foreign			
			State	NAIC	State			
		<b>I. NAIC FINANCIAL STATEMENTS</b>						
	1	Annual Statement (8 1/2"x14")	2	EO	xxx	3/1	NAIC	
	1.1	Printed Investment Schedule detail (Pages E01-E27)	1	EO	xxx	3/1	NAIC	
	2	Quarterly Financial Statement (8 1/2" x 14")	1	EO	xxx	5/15, 8/15, 11/15	NAIC	
	3	Separate Accounts Annual Statement (8 1/2"x 14")	1	EO	xxx	3/1	NAIC	
		<b>II. NAIC SUPPLEMENTS</b>						
	10	Accident & Health Policy Experience Exhibit	1	EO	xxx	4/1	NAIC	
	11	Actuarial Certification Related Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities	1	EO	xxx	3/1	Company	
	12	Actuarial Certifications Related to Hedging required by Actuarial Guideline XLIII	1	EO	xxx	3/1	Company	
	13	Actuarial Certification Related to Reserves required by Actuarial Guideline XLIII	1	EO	xxx	3/1	Company	
	14	Actuarial Opinion	1	EO	xxx	3/1	Company	
	15	Actuarial Opinion on X-Factors	1	EO	xxx	3/1	Company	
	16	Actuarial Opinion on Separate Accounts Funding Guaranteed Minimum Benefit	1	EO	xxx	3/1	Company	
	17	Actuarial Opinion on Synthetic Guaranteed Investment Contracts	1	EO	xxx	3/1	Company	
	18	Actuarial Opinion required by Modified Guaranteed Annuity Model Regulation	1	EO	xxx	3/1	Company	
	19	Analysis of Annuity Operations by Lines of Business	1	EO	xxx	4/1	NAIC	
	20	Analysis of Increase in Annuity Reserves During Year	1	EO	xxx	4/1	NAIC	
	21	Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII	1	EO	xxx	3/1	Company	
	22	Health Care Exhibit (Parts 1, 2 and 3) Supplement	1	EO	xxx	4/1	NAIC	
	23	Health Care Exhibit's Allocation Report Supplement	1	EO	xxx	4/1	NAIC	
	24	Interest Sensitive Life Insurance Products Report	1	EO	xxx	4/1	NAIC	
	25	Investment Risk Interrogatories	1	EO	xxx	4/1	NAIC	
	26	Long-term Care Experience Reporting Forms	1	EO	xxx	4/1	NAIC	
	27	Management Certification that the Valuation Reflects Management's Intent required by Actuarial Guideline XLIII	1	EO	xxx	3/1	Company	
	28	Management Discussion & Analysis	1	EO	xxx	4/1	Company	
	29	Medicare Supplement Insurance Experience Exhibit	1	EO	xxx	3/1	NAIC	
	30	Medicare Part D Coverage Supplement	1	EO	xxx	3/1, 5/15, 8/15, 11/15	NAIC	
	31	Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV	1	EO	xxx	3/1, 5/15, 8/15, 11/15	Company	
	32	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXV	1	EO	xxx	3/1, 5/15, 8/15, 11/15	Company	
	33	Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI	1	EO	xxx	3/1, 5/15, 8/15, 11/15	Company	
	34	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value)	1	EO	xxx	3/1, 5/15, 8/15, 11/15	Company	
	35	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value)	1	EO	xxx	3/1, 5/15, 8/15, 11/15	Company	
	36	Risk-Based Capital Report	1	N/A	xxx	3/1	NAIC	
	37	RBC Certification required under C-3 Phase I	1	N/A	xxx	3/1	Company	
	38	RBC Certification required under C-3 Phase II	1	N/A	xxx	3/1	Company	
	39	Statement on non-guaranteed elements – Exhibit 5 Int. #3	1	EO	xxx	3/1	Company	
	40	Statement on participating/non-participating policies – Exhibit 5, Inter. #1&2	1	EO	xxx	3/1		
	41	Supplemental Compensation Exhibit	1	N/A	N/A	3/1	NAIC	
	42	Trusted Surplus Statement	1	EO	xxx	3/1, 5/15, 8/15, 11/15	NAIC	



		<b>III. ELECTRONIC FILING REQUIREMENTS</b>						
	50	Annual Statement Electronic Filing	xxx	1	xxx	3/1	NAIC	
	51	March .PDF Filing	xxx	1	xxx	3/1	NAIC	
	52	Separate Accounts Electronic Filing	xxx	1	xxx	3/1	NAIC	
	53	Separate Accounts .PDF Filing	xxx	1	xxx	3/1	NAIC	
	54	Supplemental Electronic Filing	xxx	1	xxx	4/1	NAIC	
	55	Supplemental .PDF Filing	xxx	1	xxx	4/1	NAIC	
	56	Quarterly Statement Electronic Filing	xxx	1	xxx	5/15, 8/15 & 11/15	NAIC	
	57	Quarterly .PDF Filing	xxx	1	xxx	5/15, 8/15 & 11/15		
	58	June .PDF Filing	xxx	1	xxx	6/1	NAIC	
		<b>IV. AUDIT/INTERNAL CONTROL RELATED REPORTS</b>						
	71	Accountants Letter of Qualifications	xxx	EO	N/A	6/1	Company	
	72	Audited Financial Reports	xxx	EO	xxx	6/1	Company	
	73	Audited Financial Reports Exemption Affidavit	xxx	N/A	N/A	N/A	Company	
	74	Communication of Internal Control Related Matters Noted in Audit	xxx	N/A	N/A	8/1	Company	
	75	Independent CPA (change)	xxx	N/A	N/A	N/A	Company	
	76	Management's Report of Internal Control Over Financial Reporting	xxx	N/A	N/A	8/1	Company	
	77	Notification of Adverse Financial Condition	xxx	N/A	N/A	N/A	Company	
	78	Report of Significant Deficiencies in Internal Controls	xxx	N/A	N/A	N/A	Company	
	79	Request for Exemption to File	xxx	N/A	N/A	N/A	Company	
		<b>V. STATE REQUIRED FILINGS</b>						
	101	Annual Report/Renewal for Fraternal Companies	1	0	1	03-01-2011	State	See note 'O'
	102	State Page	1	0	1	03-01-2011	Company	See note 'P'
	103	Schedule T	1	0	1	03-01-2011	Company	See note 'P'
	104							

\*If XXX appears in this column, this state does not require this filing, if hard copy is filed with the state of domicile and if the data is filed electronically with the NAIC. If N/A appears in this column, the filing is required with the domiciliary state. EO (electronic only filing).

\*\*If Form Source is NAIC, the form should be obtained from the appropriate vendor.



		<b>NOTES AND INSTRUCTIONS (A-K APPLY TO ALL FILINGS)</b>	
	A	Required Filings Contact Person:	Luann Johnson 605-773-3563 Luann.Johnson@state.sd.us
	B	Mailing Address:	South Dakota Division of Insurance 445 East Capitol Ave Pierre, SD 57501
	C	Mailing Address for Annual Report/Renewal:	South Dakota Division of Insurance 445 East Capitol Ave Pierre, SD 57501
	D	Mailing Address for Annual Report/Renewal Payments:	South Dakota Division of Insurance 445 East Capitol Ave Pierre, SD 57501
	E	Delivery Instructions:	Postmarked NO LATER than 03-01-2011  NO EXCEPTIONS
	F	Late Filings:	A penalty fee of 1.5% will apply if postmarked after March 1st
	G	Original Signatures:	Original signatures are required on all filings for domestic companies and on premium tax forms for ALL companies.
	H	Signature/Notarization/Certification:	
	I	Amended Filings:	
	J	Exceptions from normal filings:	
	K	Bar Codes (State or NAIC):	
	L	Signed Jurat:	Domestic companies only
	M	NONE Filings:	
	N	Filings new, discontinued or modified materially since last year:	Foreign companies <b>are not</b> required to file the annual statements OR the diskette.
	O	Filing fees are indicated on the 'Annual Report/Renewal for Fraternal Companies' form. See SDCL 58-37A-26 and 58-37A-27	Obtain Annual Report at <a href="http://www.state.sd.us/insurance">www.state.sd.us/insurance</a> Available early January 2011
	P	Attach State Page and Schedule T to the Annual Report. <b>Do not</b> send under separate cover.	



**General Instructions  
For Companies to Use Checklist**

**Please Note:** This state's instructions for companies to file with the NAIC are included in this Checklist. The NAIC will not be sending their own checklist this year.

**Electronic filing is intended to include filing via the Internet or filing via diskette with the NAIC. Companies that file with the NAIC via the Internet are not required to submit diskettes to the NAIC. Companies are not required to file hard copy filings with the NAIC.**

**Column (1) (Checklist)**

Companies may use the checklist to submit to a state, if the state requests it. Companies should copy the checklist and place an "x" in this column when mailing information to the state.

**Column (2) (Line #)**

Line # refers to a standard filing number used for easy reference. This line number may change from year to year.

**Column (3) (Required Filings)**

Name of item or form to be filed.

The *Annual Statement Electronic Filing* includes the annual statement data and all supplements due March 1, per the *Annual Statement Instructions*. This includes all detail investments schedules and other supplements for which the *Annual Statement Instructions* exempt printed detail.

The *March .PDF Filing* is .pdf files for annual statement data, detail for investment schedules and supplements due March 1.

The *Separate Accounts Electronic Filing* includes the separate accounts annual statement and investment schedule detail.

The *Separate Accounts .PDF Filing* is the .pdf file for the separate accounts annual statement and investment schedule detail.

The *Supplemental Electronic Filing* includes all supplements due April 1, per the *Annual Statement Instructions*.

The *Supplemental .PDF Filing* is the .pdf file for all supplements due April 1.

The *Quarterly Electronic Filing* includes the quarterly statement data.

The *Quarterly .PDF Filing* is the .pdf for quarterly statement data.

The *June .PDF Filing* is the .pdf file for the Audited Financial Statements and Accountants Letter of Qualifications.

**Column (4) (Number of Copies)**

Indicates the number of copies that each foreign or domestic company is required to file for each type of form. The Blanks (E) Task Force modified the 1999 *Annual Statement Instructions* to waive paper filings of certain NAIC supplements and certain investment schedule detail, if such investment schedule data is available to the states via the NAIC database. The checklists reflect this action taken by the Blanks (E) Task Force. XXX appears in the "Number of Copies" "Foreign" column for the appropriate schedules and exhibits. **Some states have chosen to waive printed quarterly and annual statements from their foreign insurers and to rely upon the NAIC database for these filings. This waiver could include supplemental annual statement filings. The XXX in this column might signify that the state has waived the paper filing of the annual statement and all supplements.**

**Column (5) (Due Date)**

Indicates the date on which the company must file the form.



**Column (6) (Form Source)**

This column contains one of three words: “NAIC,” “State,” or “Company.” If this column contains “NAIC,” the company must obtain the forms from the appropriate vendor. If this column contains “State,” the state will provide the forms with the filing instructions (generally, on its website). If this column contains “Company,” the company, or its representative (e.g., its CPA firm), is expected to provide the form based upon the appropriate state instructions or the NAIC *Annual Statement Instructions*..

**Column (7) (Applicable Notes)**

This column contains references to the Notes to the Instructions that apply to each item listed on the checklist. The company should carefully read these notes before submitting a filing.